OHP 1115 Medicaid Waiver 2022-2027

Community Engagement Webinar

June 7, 2023



Welcome!

Please keep yourself muted until called



This Session is being Recorded



 You can also email your input at any time to 1115waiver.renewal@odhsoha.oregon.gov



Virtual Meeting Practices

- You may notice staff doing the following:
- Giving Visual Descriptions of our appearances onscreen
- Stating our names each time we speak
- Pausing for close captioning
- Explaining acronyms the first time they are used



Today's Topics

- Health Equity and Community Engagement
- Overview of Medicaid and Waiver in Oregon
- Updated Waiver Implementation Timeline
- Feedback and Questions



Health Equity Goal

 Oregon will have established a health system that creates health equity when all people can reach their full health potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, age, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances.



Health Equity Goal

Achieving health equity requires the ongoing collaboration of all regions and sectors of the state, including tribal governments to address:

- The equitable distribution or redistribution of resources and power; and
- Recognizing, reconciling and rectifying historical and contemporary injustices.



OHA's Commitment to Community Engagement

 We acknowledge the State of Oregon (and its systems) has perpetuated institutional, systemic, and structural barriers that have silenced the voices of communities over time.

 We recognize community-engaged health improvement is a longterm and adapting process. OHA is committed to meaningful engagement with communities via traditional and emerging mechanisms for community engagement.



OHA's Commitment to Community Engagement

 We are committed to transparency. Information will be openly and honestly shared so everyone has the benefit of the same information.

 We welcome feedback about how to make Community Engagement more inclusive and accessible.



Overview: Oregon Health Plan and the OHP 1115 Medicaid Waiver

Terms and basic information

What is the Oregon Health Plan?

Medicaid

Medicaid is the nation's public health insurance program for families. In Oregon we call it the Oregon Health Plan (OHP).

Oregon Health Plan

The Oregon Health Plan (OHP) is free health coverage available to individuals—children, teens, and adults—who live in Oregon and meet income and other criteria. You can apply for OHP at any time during the year.



Getting and keeping OHP

Online using the ONE Applicant Portal (ONE.oregon.gov)

- For Certified Assisters and the public
- Often the quickest, easiest way to apply

Paper or PDF: OHP 7210 (fill out electronically or by hand)

Phone: 1-800-699-9075

Local ODHS Offices across Oregon

Assisters: Find one at oregonhealthcare.gov/gethelp



What's a waiver?



People are eligible for the Oregon Health Plan based on their income or for other reasons.

Federal rules set minimum standards related to eligibility and required benefits. But states can ask to WAIVE some federal rules to have more flexibility and offer the Oregon Health Plan to more people and cover more services than usually allowed.

Every five years, Oregon must renew its agreement with the federal government around the Oregon Health Plan – proposing new changes and continuing existing programs. The federal government can accept or reject these proposals.

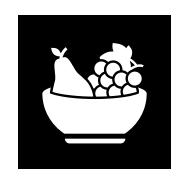


Overarching waiver goal: Advance Health Equity

To achieve this, our policy framework breaks down the drivers of health inequities into actionable sub-goals:



Ensuring people can maintain their health coverage



Improving health outcomes by addressing health related social needs



Ensuring smart, flexible spending for health-related social needs and health equity



Creating a more equitable, culturally-and linguistically-responsive health care system



Let's Talk Timeline

Waiver implementation timeline walkthrough

Waiver Implementation Timing

The elements of the waiver will phase in over the five years of the demonstration. One of the state's primary goals is to begin rolling out HRSN services in 2024.

2025

2023

- **EPSDT** (live 1/1)
- ContinuousEligibility (live July)

- All HRSN Services provided
- YSHCN eligibility criteria for individuals with high needs, including serious mental illness, and complex chronic conditions

2027

 Prioritized List phased out of waiver and into state plan amendment (SPA) (1/1)











Terminology Key

EPSDT: Early & Periodic Screening, Diagnostic and Treatment

HRSN: Health-Related

Social Needs

YSHCN: Youth with Special Health Care Needs

2024

- Proposed phased roll out of HRSN Services beginning (1/1 Climate; 7/1 Phasing of Housing/Nutrition)
- Work begins to transition Prioritized List to state plan

2026

 YSHCN eligibility criteria for individuals with two noncomplex chronic conditions roll out



Early and Periodic Screening, Diagnosis, & Treatment (EPSDT)

The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for OHP members under age 21. This includes screenings, checkups, tests, and follow-up care.

 These services can help catch concerns early, prevent and treat illness, and support children and youth with disabilities.

Coverage of expanded EPSDT services began January 1, 2023. This means that OHP may now cover services for members that weren't covered before.

Learn more here: www.Oregon.gov/EPSDT

Member fact sheets available in many languages!



OHP Continuous Eligibility

Part of the 1115 OHP Medicaid Waiver, starting July 2023.

- Oregon will provide continuous eligibility for children through the month in which they turn age 6, regardless of when they first enroll in the Oregon Health Plan, and regardless of changes in circumstances that would otherwise cause a loss of eligibility.
- OHP will provide two-years of continuous eligibility for people age six and up even if their circumstances change.

NOTE: Continuous eligibility does not apply to long term care services and supports.



Health-Related Social Needs (HRSN)

Required to roll out by 2025, we expect to begin these services in 2024

- Climate Benefit: January 2024
- Housing and Nutrition Services: July 2024 begin phase-in
 - Phase-in complete by 2025



Transition populations eligible for HRSN services

- Youth with Special Health Care Needs;
- Adults and youth discharged from an IMD;
- Adults and youth released from incarceration;
- Youth involved in the child welfare system, including youth transitioning out;
- Individuals transitioning from Medicaid-only to dual eligibility status;
- Individuals who are homeless or at risk of becoming homeless; and,
- Individuals with a high-risk clinical need who reside in a region that is experiencing extreme weather events.



HRSN Services for transition populations

Housing Supports

- Rent/temporary housing for up to 6 months
- Utility costs
- Pre-tenancy and tenancy sustaining services
- Case management, outreach, and education including linkages to other state and federal benefits
- Housing transition navigation services
- One-time transition and moving costs
- Housing deposits to secure housing
- Medically necessary home accessibility modifications

Nutrition Supports

- Nutrition counseling and education
- Medically-tailored meals, up to 3 meals a day for up to 6 months
- Meals or pantry stocking for children under 21, youth with special health care needs (YSHCN), and pregnant individuals, up to 3 meals a day for up to 6 months
- Fruit and vegetable prescriptions for up to 6 months

Climate Change

 Medically necessary air conditioners, heaters, humidifiers, air filtration devices, generators and refrigerators

* CMS expects that any new HRSN initiative will add to, not replace, existing Federal, State, and Local services or programs

Changes to the Prioritized List

The Prioritized List is one part of determining if OHP covers a service for members 21 and older. Treatment for health care conditions is ranked by clinical effectiveness and cost-effectiveness.

- Treatments that help prevent illness are ranked higher than services that treat illness after it occurs.
- OHP covers treatments that are ranked on a covered Prioritized List line for the client's reported medical condition.

Oregon and CMS agree that the Prioritized List as it is currently used in Oregon's Medicaid program no longer requires waiver authority and that it should transition to the State Plan.



Youth with special health care needs (YSHCN)

Expanded eligibility criteria will allow youth with special health care needs to have expanded benefits, including EPSDT, until age 26

Youth will qualify in early adulthood (19-26) if they've had higher health needs and/or conditions since childhood

Same income levels as children and teens (up to 305% FPL)

HRSN benefits will be available for this population as well as continuous eligibility



Need services and supports now?

CCOs have flexible services for their members

For housing and additional supports, contact 211

- Dial 2-1-1 or 1-866-698-6155
- Email help@211info.org Response within 24 hours
- Text your zip code to 898211 (TXT211) M-F from 9 a.m.- 5 p.m.
- Search for resources at <u>www.211info.org</u>

NeedFood.Oregon.gov is a one stop website for new and existing food needs. It also has flyers and social media images in 11 languages for partners



Questions:

- After participating in this Webinar, how would you rate your level of awareness on the topics covered?
- How can we better reach you/engage with communities?
- What topics about the OHP waiver would you like to learn more about in the future?



Thank you!

Updates and information:

oregon.gov/1115waiverrenewal

Subscribe to updates that will be sent out in the coming months:

https://public.govdelivery.com/accounts/ORDHS/signup/14507

Reach out to us anytime:

1115waiver.renewal@odhsoha.oregon.gov

